



ALPHONSE DUPERRON
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MTL, QC, Canada
H1Y 2E7
APPL NO: 10 718,296

July 3, 2006

IFW

COMMISION FOR PATENTS
c/o Paul Shanoski
Office of Petitions
P.O. BOX 1450
Alexandria, Virginia 22313-1450

Subject: Document Corrections

Following your letter, I have completed the requested corrections to my documents. Thank you very much for allotting me with a two-month extension. I am very sorry for any inconvenience these errors as well as the mistake in my postal code may have caused. You will find a \$250.00 money order included herein for the small entity two-month extension.

Sincerely,

Alphonse Duperron

Refund Ref: 03/06/2007 CKHLOK 0000158531

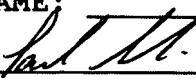
CHECK Refund Total: \$250.00

08/01/2006 RFEKADU1 00000005 10718296

01 FC:2252 225.00 OP
02 FC:9998 25.00 OP

Adjustment Date: 08/06/2007 CKHLOK
08/01/2006 RFEKADU1 00000005 10718296
01 FC:2252 -225.00 OP
02 FC:9998 -25.00 OP

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request:	07/24/07	2 Serial/Patent #	10718296	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input type="checkbox"/> Filing				\$
<input type="checkbox"/> Amendment				\$
<input checked="" type="checkbox"/> Extension of Time		None	7-31-06	\$ 250. 00
<input type="checkbox"/> Notice of Appeal/Appeal				\$
<input type="checkbox"/> Petition				\$
<input type="checkbox"/> Issue				\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.				\$
<input type="checkbox"/> Maintenance				\$
<input type="checkbox"/> Assignment				\$
<input type="checkbox"/> Other				\$
		7 TOTAL AMOUNT OF REFUND	\$ 250 250. 00	
8 TO BE REFUNDED BY:				
<input checked="" type="checkbox"/> Overpayment		Treasury Check		
<input type="checkbox"/> Duplicate Payment		Credit Deposit A/C #:		
<input checked="" type="checkbox"/> No Fee Due (Explanation):	9 500 - 00 00			
Extension of time was not necessary.				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME:		Paul Shanoski	TITLE: Senior Attorney	
SIGNATURE:			PHONE: 571-272-3225	
OFFICE: Office of Petitions				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****				
APPROVED:			DATE: 816/07	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B